Case 16-37090 Doc 1 Filed 11/22/16 Entered 11/22/16 09:34:42 Desc Main Document Page 1 of 61

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
	your pictu exar	e the name that is on a government-issued ure identification (for apple, your driver's use or passport).	Jeffrey First name D. Middle name		First name Middle name
	iden	g your picture tification to your ting with the trustee.	Feldman Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years			
		ide your married or den names.			
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer atification number	xxx-xx-2404		

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Case number (if known)

Debtor 1 **Jeffrey D. Feldman**

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	446 Wyeth Circle Bolingbrook, IL 60440	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Will County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 **Jeffrey D. Feldman**

Case number (if known)

ar	Tell the Court About	Your B	ankruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice</i> of page 1 and check t		v 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy ate box.
	choosing to file under	■ C	hapter 7				
		□с	hapter 11				
		□с	hapter 12				
		□с	hapter 13				
3.	How you will pay the fee	•	about how yo	u may pay. Ty attorney is sub	pically, if you are pay	ring the fee y	ck with the clerk's office in your local court for more details rourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with
					stallments. If you cho		ion, sign and attach the Application for Individuals to Pay
			I request that but is not requ	t my fee be w	aived (You may requ your fee, and may d	est this option	on only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line that
							in installments). If you choose this option, you must fill out icial Form 103B) and file it with your petition.
).	Have you filed for bankruptcy within the	■ No).				
	last 8 years?	☐ Ye	∋S.				
			District		Whe		Case number
			District		Whe	en	Case number
			District		Whe	en	Case number
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with	□Ye					
	you, or by a business partner, or by an affiliate?						
			Debtor				Relationship to you
			District		Whe	en	Case number, if known
			Debtor				Relationship to you
			District		Whe	en	Case number, if known
11.	Do you rent your residence?	■ No	Go to li	ne 12.			
	residence:	□Ye	es. Has yo	ur landlord obt	ained an eviction jud	gment again	st you and do you want to stay in your residence?
				No. Go to line	12.		
				Yes. Fill out Ir bankruptcy pe		ıt an Eviction	Judgment Against You (Form 101A) and file it with this

		Document	Page 4 of 61	
Debtor 1	Jeffrey D. Feldman		Case number (if known)	

Part	Report About Any Bu	sinesses	You Own	as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State & ZIP Code			
	it to this petition.		Check	k the appropriate box to describe your business:			
				Health Care Business (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broker (as defined in 11 U.S.C. § 101(6))			
				None of the above			
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balan-				der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of low statement, and federal income tax return or if any of these documents do not exist, follow the procedure (1)(B).			
	For a definition of small	No.	I am n	not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankr Code.				
		☐ Yes.	I am fi	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention			
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?	■ No. □ Yes.		the hazard?			
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property? Number, Street, City, State & Zip Code			

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Debtor 1 Jeffrey D. Feldman

Case number (if known)

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 61 Case number (if known) Debtor 1 Jeffrey D. Feldman **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 100-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million ■ \$0 - \$50.000 □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jeffrey D. Feldman Signature of Debtor 2 Jeffrey D. Feldman Signature of Debtor 1 Executed on Executed on November 22, 2016

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Jeffrey D. Feldman

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Gloria I	M. Longest	Date	November 22, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Gloria M. I	Longest		
Law Office	e of Gloria M. Longest PC		
385 South Coal City,	Broadway IL 60416		
Number, Street,	City, State & ZIP Code		
Contact phone	815-634-0000	Email address	glongest@cbcast.com
06194360			
Bar number & S	tate		

		Docume	eni Pade 8 oi 61
Fill in this infor	mation to identify your	case:	
Debtor 1	Jeffrey D. Feldma	n	
	First Name	Middle Name	Last Name
Debtor 2			
Spouse if, filing)	First Name	Middle Name	Last Name
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS
Case number _			

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,263.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	7,263.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	8,155.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	158,447.3
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	179,521.5
	Your total liabilities	\$	346,123.93
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,942.3
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,930.00
Paı	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other so	hedules.
7.	■ Yes What kind of debt do you have?		
7.	-	a persona	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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Page 9 of 61 Case number (if known) Debtor 1 Jeffrey D. Feldman

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	2 204 50
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$ 2,204.58

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
Troill Falt 4 on Schedule Lift, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	158,447.34
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	158,447.34

Case 16-37090 Doc 1 Filed 11/22/16 Entered 11/22/16 09:34:42 Desc Main Document Page 10 of 61 Fill in this information to identify your case and this filing: Debtor 1 Jeffrey D. Feldman Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Nissan Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: **Altima** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2008 Debtor 2 only Current value of the Current value of the 100.000 Approximate mileage: entire property? Debtor 1 and Debtor 2 only portion you own? Other information: At least one of the debtors and another \$6,503.00 \$6,503.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$6,503.00 pages you have attached for Part 2. Write that number here.....=>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

Debtor 1	Document Page 11 of 61 Jeffrey D. Feldman Jeffrey D. Feldman	Desc Main
_		
■ Yes.	Describe	4
	Furniture, 2 TV's	\$500.00
■ No	 nics es: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music coincluding cell phones, cameras, media players, games Describe 	ollections; electronic devices
Example ■ No	bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, other collections, memorabilia, collectibles Describe	or baseball card collections;
Example No	ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes a musical instruments Describe	nd kayaks; carpentry tools;
■ No	ns oles: Pistols, rifles, shotguns, ammunition, and related equipment Describe	
□ No	s bles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe	
	Clothing	\$200.00
■ No □ Yes. 13. Non-fa Examp	Describe Transimals Describes: Dogs, cats, birds, horses Describe	
	Mixed breed dog and cat	\$50.00
■ No □ Yes.	her personal and household items you did not already list, including any health aids you did not list Give specific information the dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here	\$750.00
	scribe Your Financial Assets	
Do you ov	vn or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 2

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Debtor 1	Jeffrey D. Feldman	D(ocument	Page 12 of	Case number (if known)	-
16. Cash Exam	aples: Money you have in you	r wallet, in your hon	ne, in a safe depo	osit box, and on ha	nd when you file your petiti	ion
Yes						
					Cash	\$10.00
Exam	sits of money aples: Checking, savings, or o institutions. If you have				n credit unions, brokerage	houses, and other similar
■ No □ Yes			Institution r	name:		
	s, mutual funds, or publicly aples: Bond funds, investment		erage firms, mor	ney market account	s	
	In:	stitution or issuer na	ame:			
•	oublicly traded stock and int venture	terests in incorpor	ated and uninc	orporated busines	sses, including an interes	st in an LLC, partnership, and
☐ Yes	. Give specific information ab Name	out them of entity:			% of ownership:	
Nego	rnment and corporate bonds tiable instruments include per negotiable instruments are tho	sonal checks, cash	iers' checks, pro	missory notes, and	money orders.	
☐ Yes	. Give specific information abo	out them r name:				
Exam	ement or pension accounts apples: Interests in IRA, ERISA	, Keogh, 401(k), 40	3(b), thrift saving	gs accounts, or othe	er pension or profit-sharing	plans
■ No						
⊔ Yes	List each account separately. Type of a		Institution r	name:		
Your Exam	ity deposits and prepaymer share of all unused deposits y aples: Agreements with landlo	ou have made so t	hat you may con ublic utilities (ele	ntinue service or use ctric, gas, water), te	e from a company elecommunications compa	nies, or others
■ No □ Yes			Institution r	name or individual:		
23. Annui	ties (A contract for a periodic	payment of money	to you, either fo	r life or for a numbe	er of years)	
	lssuer name a	and description.				
	sts in an education IRA, in a .C. §§ 530(b)(1), 529A(b), an	•	alified ABLE pro	ogram, or under a	qualified state tuition pro	ogram.
	Institution nar	me and description.	Separately file the	he records of any in	terests.11 U.S.C. § 521(c)	:
■ No	s, equitable or future interes		ner than anythir	ng listed in line 1),	and rights or powers ex	ercisable for your benefit
⊔ Yes	. Give specific information ab	out them				
	ts, copyrights, trademarks, aples: Internet domain names,				ments	

Official Form 106A/B Schedule A/B: Property page 3

 $\hfill \square$ Yes. Give specific information about them...

■ No

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De	ebtor 1	Jeffrey	D. Feldman		Document	Case number (if known)	
27.	Examp. ■ No	les: Buildii	ises, and other ng permits, exclu	sive licenses,		n holdings, liquor licenses, professional licens	es
M	oney or p	property o	wed to you?				Current value of the portion you own? Do not deduct secured
28.	■ No	unds owe					claims or exemptions.
	☐ Yes. (Give speci	fic information at	oout them, inc	luding whether you alre	ady filed the returns and the tax years	
29.	■ No	les: Past o	due or lump sum		usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
30.	Examp. ■ No	les: Unpai benef	its; unpaid loans	ty insurance p		efits, sick pay, vacation pay, workers' comper	nsation, Social Security
	☐ Yes.	Give spec	ific information				
31.	Examp. ■ No	les: Health			nealth savings account (l	HSA); credit, homeowner's, or renter's insurar	nce
				pany name:	•	Beneficiary:	Surrender or refund value:
32.	If you a someon	re the ber ne has die	neficiary of a livin		someone who has die t proceeds from a life in	ed surance policy, or are currently entitled to rece	eive property because
33.	Examp. ■ No	les: Accide			you have filed a lawsui surance claims, or rights	it or made a demand for payment to sue	
34.	■ No	_	·	ed claims of	every nature, includin	g counterclaims of the debtor and rights to	set off claims
	☐ Yes.	Describe (each claim				
	■ No		sets you did not	already list			
36					om Part 4, including a	ny entries for pages you have attached	\$10.00
Pa	rt 5: Des	cribe Any	Business-Related	Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
37.	Do you o	wn or have	any legal or equi	table interest i	n any business-related p	roperty?	
	No. Go					•	
	Yes. G	o to line 38					

Case 16-37090 Doc 1 Filed 11/22/16 Entered 11/22/16 09:34:42 Desc Main Document Page 14 of 61 Case number (if known) Debtor 1 Jeffrey D. Feldman Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$6,503.00 57. Part 3: Total personal and household items, line 15 \$750.00 Part 4: Total financial assets, line 36 \$10.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00

\$7,263.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$7,263.00

\$7,263.00

			Document	Ē	Page 15 of 61	_
Fil	l in this inform	nation to identify your c	ase:			
De	btor 1	Jeffrey D. Feldmar				
Dα	btor 2	First Name	Middle Name	L	ast Name	
	ouse if, filing)	First Name	Middle Name	L	ast Name	
Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT OF	LLIN	OIS	
Ca	se number					
(if k	nown)					☐ Check if this is an amended filing
Oí	fficial Fo	rm 106C				
			perty You Cla	im	as Exempt	4/16
he nee	property you lis	sted on <i>Schedule A/B: Pr</i> d attach to this page as m	roperty (Official Form 106A/B)	as yo	our source, list the property that you	or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
spe any un exe	ecific dollar and applicable standard applicable standard applicable standard applicable	nount as exempt. Altern atutory limit. Some exe nlimited in dollar amou	atively, you may claim the f mptions—such as those for nt. However, if you claim an	ull fai heal exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	One way of doing so is to state a ing exempted up to the amount of penefits, and tax-exempt retirement the under a law that limits the t, your exemption would be limited
Pa	rt 1: Identif	y the Property You Clai	m as Exempt			
1.	Which set of	exemptions are you cla	niming? Check one only, ever	n if yo	our spouse is filing with you.	
	You are cla	aiming state and federal r	nonbankruptcy exemptions. 1	1 U.S	S.C. § 522(b)(3)	
	_	_	s. 11 U.S.C. § 522(b)(2)			
2				mnt	fill in the information below.	
۷.		on of the property and line	•		ount of the exemption you claim	Specific laws that allow exemption
		that lists this property	portion you own Copy the value from Schedule A/B		eck only one box for each exemption.	opeonic lane that allow exemption
		n Altima 100,000 mile	301134011311		\$0.00	735 ILCS 5/12-1001(c)
	Line from Sch	nedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	Furniture, 2		\$500.00		\$500.00	735 ILCS 5/12-1001(b)
	Line from Sch	nedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	Clothing		\$200.00		\$200.00	735 ILCS 5/12-1001(a)
		nedule A/B: 11.1			100% of fair market value, up to	
					any applicable statutory limit	
	Cash Line from Sch	nedule A/B: 16.1	\$10.00		\$10.00	735 ILCS 5/12-1001(b)
					100% of fair market value, up to any applicable statutory limit	
3.	(Subject to ad	ljustment on 4/01/19 and	, ,	ses fi	led on or after the date of adjustme	,

Official Form 106C

No

Yes

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Debtor 1 **Jeffrey D. Feldman**

Case	e 16-37090	Doc 1	Filed 11/22/16 Document	Entero	ed 11/22/16 09:34 7 of 61	1:42 Desc M -	lain
Fill in this informat	ion to identify you	ır case:					
Debtor 1	Jeffrey D. Feldn	nan					
-	First Name		ddle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Mic	ddle Name	Last Name			
United States Bankr	uptcy Court for the	NORTH	HERN DISTRICT OF ILL	INOIS			
Case number (if known)							
Official Form ^o Schedule D		Who I	Have Claims :	Secure	d by Property		12/15
					qually responsible for supp On the top of any additional		
. Do any creditors ha	ve claims secured by	y your prope	rty?				
☐ No. Check th	is box and submit t	his form to t	he court with your other	schedules. `	You have nothing else to r	eport on this form.	
_	l of the information		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		Delow.					
•	Secured Claims				Column A (Column B	Column C
for each claim. If more	than one creditor has	a particular o	e secured claim, list the cre- claim, list the other creditors ording to the creditor's name	in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion If any
2.1 Southern Au	utomotive FL	Describe tl	he property that secures t	he claim:	\$8,155.00	\$6,503.00	\$1,652.00
Creditor's Name		2008 Nis	san Altima 100,000	miles			
2901 Wm Oa Blvd		As of the d	late you file, the claim is:	Check all that			
Fort Lauder 33311	dale, FL	apply.	,	onoon all that			
Number, Street, Cit	Number, Street, City, State & Zip Code Unliquidated						
Who owes the debt?	? Check one.	•	lien. Check all that apply.				
■ Debtor 1 only		An agre	ement you made (such as r	mortgage or se	ecured		
Debtor 2 only		car loai	n)				
☐ Debtor 1 and Debto	or 2 only	☐ Statutor	ry lien (such as tax lien, med	chanic's lien)			
At least one of the	debtors and another	☐ Judgme	ent lien from a lawsuit				
☐ Check if this claim community debt	n relates to a	Other (in	ncluding a right to offset)				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$8,155.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$8,155.00

Last 4 digits of account number

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

4301

Date debt was incurred

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Document Page 18 of 61 Fill in this information to identify your case: Debtor 1 Jeffrey D. Feldman Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount amount 2.1 \$705.32 Illinois Department of Revenue Last 4 digits of account number 2402 \$705.32 \$0.00 Priority Creditor's Name **Bankruptcy Section** When was the debt incurred? PO Box 64338 Chicago, IL 60664 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only □ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No

☐ Yes

☐ Other. Specify

2011 State income tax

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Debto	or 1 Jeffrey D. Feldman	Case number (if know)					
2.2	Illinois Department of Revenue	Last 4 digits of account number	2404	\$5,399.78	\$5,399.78	\$0.00	
	Priority Creditor's Name Bankruptcy Section PO Box 64338 Chicago, IL 60664	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all	that apply			
,	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:				
	☐ At least one of the debtors and another	☐ Domestic support obligations					
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the a	overnment			
	Is the claim subject to offset?	☐ Claims for death or personal inj	_				
	■ No	☐ Other. Specify					
	Yes	2006, 2007	, 2008, 20	09 Illinois state in	come tax		
2.3	Illinois Department of Revenue Priority Creditor's Name	Last 4 digits of account number	2404	\$7,740.89	\$7,740.89	\$0.00	
	Bankruptcy Section PO Box 64338	When was the debt incurred?					
	Chicago, IL 60664 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all	that apply			
,	Who incurred the debt? Check one.	☐ Contingent		,			
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:				
	☐ At least one of the debtors and another	☐ Domestic support obligations					
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the a	overnment			
	Is the claim subject to offset?	☐ Claims for death or personal inj	_				
	■ No	Other. Specify					
	Yes	2002, 2003 ax	, 2004, 20	05, 2006 Illinois st	tate income		
2.4	Internal Revenue Service	Last 4 digits of account number	2404	\$11,182.72	\$11,182.72	\$0.00	
	Priority Creditor's Name PO Box 7346 Philodolphia PA 10101 7346	When was the debt incurred?					
	Philadelphia, PA 19101-7346 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all	that apply			
,	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:				
	☐ At least one of the debtors and another	☐ Domestic support obligations					
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the g	overnment			
	Is the claim subject to offset?	Claims for death or personal inj	_				
	■ No	Other. Specify					
	□ Yes	2010 Fede	ral income	e tax			

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Debt	Jenney D. Feldman		Case III	ulliper (ii kilow)		
2.5	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number	2404	\$12,338.03	\$12,338.03	\$0.00
	PO Box 7346	When was the debt incurred?				
	Philadelphia, PA 19101-7346					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all	that apply		
	_	Contingent				
	Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	lacksquare At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the g	povernment		
	Is the claim subject to offset?	Claims for death or personal inj	ury while you	were intoxicated		
	■ No	Other. Specify				
	Yes	2008, 2009	Federal i	ncome tax		
2.6	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number	2404	\$65,427.18	\$65,427.18	\$0.00
	PO Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all	that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the g	jovernment		
	Is the claim subject to offset?	Claims for death or personal inj	ury while you	were intoxicated		
	■ No	Other. Specify				
	☐ Yes	1999, 2001 income tax		03, 2004, 2005, 20	06 Federal	
2.7	Internal Revenue Service	Last 4 digits of account number	2404	\$55,653.42	\$55,653.42	\$0.00
	Priority Creditor's Name PO Box 7346	When was the debt incurred?				
	Philadelphia, PA 19101-7346 Number Street City State Zlp Code					
		As of the date you file, the claim	is: Check all	that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	lacksquare At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the g	jovernment		
	Is the claim subject to offset?	Claims for death or personal inj	ury while you	were intoxicated		
	No	Other. Specify				
	Yes	1992, 1993	, 1994 Fed	dearl income tax		
Part	2: List All of Your NONPRIORITY Unsecu	ıred Claims				
3. C	Oo any creditors have nonpriority unsecured clain	ns against you?				
	☐ No. You have nothing to report in this part. Submit	this form to the court with your other s	chedules.			
	Yes.					
u	ist all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each c han one creditor holds a particular claim, list the othe	laim. For each claim listed, identify wh	at type of cla	aim it is. Do not list claim	s already included in Par	t 1. If more

Total claim

Part 2.

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Jeffrey D. Feldman	Case number (if know)	
Adventist Bolingbrook Hospital	Last 4 digits of account number 2404	\$1,039.00
Nonpriority Creditor's Name 75 Remittance Dr., Ste.6097 Chicago, IL 60675-6097	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical services	
Adventist Bolingbrook Hospital	Last 4 digits of account number 2404	\$900.00
Nonpriority Creditor's Name 75 Remittance Dr., Ste.6097 Chicago, IL 60675-6097	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical services	
Adventist Bolingbrook Hospital Nonpriority Creditor's Name	Last 4 digits of account number 2404	\$139.00
75 Remittance Dr., Ste.6097 Chicago, IL 60675-6097	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
■ NO □ Yes	Other Specific Medical services	
⊔ res	Other Specify IVICUICAL SELVICES	

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Debtor 1 Jeffrey D. Feldman Case number (if know) 4.4 Adventist Bolingbrook Hospital Last 4 digits of account number 0716 \$326.00 Nonpriority Creditor's Name 75 Remittance Dr., Ste.6097 When was the debt incurred? 11/17/15 Chicago, IL 60675-6097 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical srevices** Other. Specify 4.5 **Adventist Bolingbrook Hospital** \$261.00 Last 4 digits of account number 7602 Nonpriority Creditor's Name 75 Remittance Dr., Ste.6097 When was the debt incurred? 1/18/16 Chicago, IL 60675-6097 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Π Yes **Medical services** Other. Specify 4.6 Adventist Bolingbrook Hospital Last 4 digits of account number 6987 \$34.35 Nonpriority Creditor's Name 75 Remittance Dr., Ste.6097 When was the debt incurred? 9/19/16 Chicago, IL 60675-6097 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical service** Other. Specify

Document Page 23 of 61 Debtor 1 Jeffrey D. Feldman Case number (if know) 4.7 **Adventist Hinsdale Hospital** Last 4 digits of account number 2404 \$1.899.00 Nonpriority Creditor's Name 120 N. Oak St. When was the debt incurred? Hinsdale, IL 60521 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical services** Other. Specify AT&T 4.8 \$104.00 Last 4 digits of account number 2404 Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? PO Box 769 Arlington, TX 76004 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Phone service ☐ Yes 4.9 Athletic & Therapeutic Inst. \$70.00 Last 4 digits of account number 1454 Nonpriority Creditor's Name PO Box 371863 When was the debt incurred? Various dates Pittsburgh, PA 15250-7863 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Medical service

Debts to pension or profit-sharing plans, and other similar debts

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Athletic & Therapeutic Inst.	Last 4 digits of account number 4136	\$
Nonpriority Creditor's Name PO Box 371863	When was the debt incurred? Various dates	
Pittsburgh, PA 15250-7863 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Medical services	
Cathy Sultiff	Last 4 digits of account number unty	\$2,00
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ2,0
188 W.Raneolph #1920	When was the debt incurred?	
Chicago, IL 60601 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dain is. Oneon all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Forcible Entry &Detainer Complaint Other. Specify Judgment entered 12/13/95	
City of Joliet/City Collector	Last 4 digits of account number 3503	•
Nonpriority Creditor's Name 150 W. Jefferson St	When was the debt incurred? 6/112/08	
Joliet, IL 60432-4156 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, containing the same of the s	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Parking Fine	

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Debtor 1 Jeffrey D. Feldman Case number (if know) 4.1 College of DuPage 2404 \$889.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 425 Fawell Blvd. When was the debt incurred? Glen Ellyn, IL 60137 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify
Tuition 4.1 **Comcast Cable** 2404 \$1,517.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 3001 When was the debt incurred? Southeastern, PA 19398-3001 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Equipment Cost & Principal ☐ Yes 4.1 **Dish Network** 0126 \$231.00 Last 4 digits of account number 5 Nonpriority Creditor's Name **Dept 94063** When was the debt incurred? Palatine, IL 60094-4063 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Satellite services ☐ Yes

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DuPage Pathology Assoc. SC	Last 4 digits of account number	8535	\$
Nonpriority Creditor's Name 520 E. 22nd Street Lombard, IL 60148	When was the debt incurred?	9/19/16	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical set	rvice	
First Premier	Last 4 digits of account number	4278	\$4
Nonpriority Creditor's Name	_		
601 S Minneapolis Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 10/09 Last Active 11/30/10	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	■ Other. Specify Credit Card	<u> </u>	
First Premier Bank	Last 4 digits of account number	3120	\$4
Nonpriority Creditor's Name 601 S. Minneapolis Avenue	When was the debt incurred?		
Sioux Falls, SD 57104 Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the dami	S. Oneck an that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	,	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other Specify Credit card		

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Document Page 27 of 61 Debtor 1 Jeffrey D. Feldman Case number (if know) 4.1 Illinois American Water 2404 \$1,272.00 Last 4 digits of account number 9 Nonpriority Creditor's Name When was the debt incurred? 95 Meadows Drive Gilberts, IL 60136 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Water services ☐ Yes 4.2 Illinois Department of Revenue 2402 \$7,740.89 Last 4 digits of account number 0 Nonpriority Creditor's Name **Bankruptcy Section** When was the debt incurred? PO Box 64338 Chicago, IL 60664 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No 2002, 2003, 2004,2005, 2006 Illinois State income tax Lien recorded DuPage County R2007-209760; 11/27/07 ☐ Yes Other. Specify Will County Lien R2007171062 11/29/07 4.2 2404 Illinois Department of Revenue \$705.32 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **Bankruptcy Section** PO Box 64338 Chicago, IL 60664 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

report as priority claims

Other. Specify

☐ Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

2011 Illinois Income Tax

Is the claim subject to offset?

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Debtor 1 Jeffrey D. Feldman Case number (if know) 4.2 Illinois Department of Revenue 2404 \$5,399.78 Last 4 digits of account number 2 Nonpriority Creditor's Name **Bankruptcy Section** When was the debt incurred? PO Box 64338 Chicago, IL 60664 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No 2006, 2007, 2008, 2009 Illinois state income tax ☐ Yes Other. Specify WillI County Lien R2011037222 4/13/11 4.2 \$399.00 **Illinois Emergency Medicine** 1016 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 71402 When was the debt incurred? Chicago, IL 60694-1400 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical services Other, Specify 4.2 4709 **Illinois Emergency Medicine** \$399.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 71402 When was the debt incurred? Chicago, IL 60694-1400 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical services** Other. Specify

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Debtor 1 Jeffrey D. Feldman Case number (if know) 4.2 Illinois Tollway 1587 \$647.10 Last 4 digits of account number 5 Nonpriority Creditor's Name PO Box 5544 When was the debt incurred? Various dates Chicago, IL 60680-5544 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Tolls ☐ Yes Other. Specify License Plate Y737152 - IL 1742,8027, 4.2 \$3.284.50 **Illinois Tollway** 6 Last 4 digits of account number W163 Nonpriority Creditor's Name PO Box 5544 When was the debt incurred? Various dates Chicago, IL 60680-5544 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No License Plate Q115147 - IL Additional ticket Nos. VS163028985, ☐ Yes Other. Specify VW163550302, VW163796376 4.2 **Illinois Tollway** 8740 \$130.30 Last 4 digits of account number Nonpriority Creditor's Name PO Box 5544 When was the debt incurred? 9/20/16 Chicago, IL 60680-5544 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Plate #Q115147 ☐ Yes

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Debtor 1 Jeffrey D. Feldman Case number (if know) 4.2 Internal Revenue Service 2404 \$55,653.42 Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts 1992, 1993, 1994 Federal Income Tax DuPage Tax Lien R1996-086891 recorded ☐ Yes Other. Specify 5/24/96 4.2 2404 **Internal Revenue Service** \$11,182.72 Last 4 digits of account number Nonpriority Creditor's Name PO Box 7346 When was the debt incurred? Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No 2010 Federal income tax Will County Lien recorded R2014038830 ☐ Yes ■ Other. Specify **5/9/14** 4.3 2404 **Internal Revenue Service** \$12,338.03 Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts 2008, 2009 Federal income tax Lien recorded Will County R2010083372 ■ Other. Specify 8/16/10 ☐ Yes

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Debtor 1 Jeffrey D. Feldman Case number (if know) 4.3 Internal Revenue Service 2404 \$65,427.18 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts 1999, 2001, 2002, 2003, 2004, 2005, 2006 Federal income tax ☐ Yes Other. Specify Will County lien R2007140243 9/20/07 4.3 Janusz K Bienia \$1,045.00 Page Last 4 digits of account number Nonpriority Creditor's Name 2901 Butterfield Rd. When was the debt incurred? Oak Brook, IL 60521 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Forcible Entry & Detainer ☐ Yes Other. Specify Judgment entered 8/7/96 4.3 Nationwide Credit Inc. 6998 \$114.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 26314 When was the debt incurred? Lehigh Valley, PA 18002-6314 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Pest services - /ternubex ☐ Yes

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Document Page 32 of 61 Debtor 1 Jeffrey D. Feldman Case number (if know) 4.3 **PLS Financial Sollutions of IL Inc** 002T \$1,076.00 Last 4 digits of account number 4 Nonpriority Creditor's Name 348 Commons Dr. When was the debt incurred? 9/4/15 Bolingbrook, IL 60440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Loan for 2003 Ford Taurs ☐ Yes 4.3 **Southwest Credit Systems** 5944 \$162.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 4120 International Parkway When was the debt incurred? **Opened 06/13 Suite 1100** Carrollton, TX 75007 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Comcast ☐ Yes 4.3 State Collection Service 1509 \$443.00 6 Last 4 digits of account number Nonpriority Creditor's Name Po Box 6250 When was the debt incurred? **Opened 01/14** Madison, WI 53716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

Other. Specify

 \square Debts to pension or profit-sharing plans, and other similar debts

Physician

Collection Attorney: Emergency Healthcare

Is the claim subject to offset?

Document Page 33 of 61 Debtor 1 Jeffrey D. Feldman Case number (if know) 4.3 Suburban Radiologists SC 0230 \$262.00 Last 4 digits of account number Nonpriority Creditor's Name 1446 N. Momentum Place When was the debt incurred? Chicago, IL 60689-5314 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical services ☐ Yes 4.3 2402 T-Mobile \$1,377.00 Last 4 digits of account number 8 Nonpriority Creditor's Name P.O. Box 742596 When was the debt incurred? Cincinnati, OH 45274-2596 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Cell service ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Convergent Outsourcing Inc** Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 9004 Part 2: Creditors with Nonpriority Unsecured Claims Renton, WA 98057-9004 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Credence Resource Management Line 4.38 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 2300 ■ Part 2: Creditors with Nonpriority Unsecured Claims Southgate, MI 48195 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Depondon Collection Service** Line 4.37 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 4833 Part 2: Creditors with Nonpriority Unsecured Claims Oak Brook, IL 60522-4833

Name and Address

Official Form 106 E/F

Enterprise Recovery Systems, Inc.

PO Box 5119

Oak Brook, IL 60522-0516

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Last 4 digits of account number

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Name and Address First National Collection Bureau 610 Waltham Way	On which entry in Part 1 or Part 2 did Line 4.17 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Sparks, NV 89434	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address	On which entry in Part 1 or Part 2 did		
Franklin Collection Service Inc PO Box 3910	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Tupelo, MS 38803-3910	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
Gatestone & Co. International Inc.	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
1000N. West Street, Ste. 1200		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Wilmington, DE 19801	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
IC System Inc.	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
PO Box 64378 Saint Paul, MN 55164		Part 2: Creditors with Nonpriority Unsecured Claims	
Cameradi, init coro-	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
Malcom S. Gerald & Assoc	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
332 S. Michigan Ave., Ste. 600 Chicago, IL 60604		Part 2: Creditors with Nonpriority Unsecured Claims	
Cilicago, ie 00004	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
Malcom S. Gerald & Assoc	Line 4.5 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
332 S. Michigan Ave., Ste. 600		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Chicago, IL 60604	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	vou list the original creditor?	
Merchants Credit Guide Co.	Line 4.7 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
223 W. Jackson Blvd.		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Chicago, IL 60606	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
Merchants Credit Guide Co.	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
223 W. Jackson Blvd.		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Chicago, IL 60606	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	vou list the original creditor?	
Merchants Credit Guide Co.	Line 4.2 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
223 W. Jackson Blvd.		Part 2: Creditors with Nonpriority Unsecured Claims	
Chicago, IL 60606	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
Merchants Credit Guide Co.	Line 4.23 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
223 W. Jackson Blvd. Chicago, IL 60606		Part 2: Creditors with Nonpriority Unsecured Claims	
omeago, iz occoo	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
Merchants Credit Guide Co.	Line 4.24 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
223 W. Jackson Blvd. Chicago, IL 60606		■ Part 2: Creditors with Nonpriority Unsecured Claims	
omeago, in 00000	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	vou list the original creditor?	
Merchants Credit Guide Co.	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
223 W. Jackson Blvd.		Part 2: Creditors with Nonpriority Unsecured Claims	

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Debtor 1 Jeffrey D. Feldman		Case number (if know)		
Chicago, IL 60606	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?		
Midland Credit management Inc.	Line 4.18 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims		
2365 Northside Dr., Ste. 300 San Diego, CA 92108		■ Part 2: Creditors with Nonpriority Unsecured Claims		
San Diego, GA 32100	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?		
Midland Credit Management Inc.	Line 4.18 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 60578		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Los Angeles, CA 90056-0578	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
PAM, LLC-IL Tollway-Unpaid Tolls	Line 4.25 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 752		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Milwaukee, WI 53201-0752	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?		
Penn Credit Corp.	Line 4.19 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 988		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Harrisburg, PA 17108-0988	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?		
West Asset Management Inc.	Line 4.38 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 790113 Saint Louis MO 63179-0113		■ Part 2: Creditors with Nonpriority Unsecured Claims		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	158,447.34
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	158,447.34
01	Or Lordina	01		Total Claim
61.	Student loans	61.	\$	0.00
6g.	Obligations arising out of a separation agreement or divorce that	6a.	\$	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	•	179,521.59
	here.		Ψ	
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	179,521.59
	6b. 6c. 6d. 6e. 6f. 6g. 6h.	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6d.	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$ \$ 6b. \$ 6c. \$ 6d. \$ 6e. \$ 6f. \$ 6g. \$ 6h. \$ 6h. \$ 6i. \$

Last 4 digits of account number

Fill in this information to identify your case:								
Debtor 1	Jeffrey D. Feldma	an						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF ILLINOIS						
Case number								
(if known)								

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2	-				
	Name				_
	Number	Street			—
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	

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		Docume	nt Page 37 d	of 61	
Fill in this	information to identify you	ur case:			
Debtor 1	Jeffrey D. Feldi		LastNama		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the	: NORTHERN DISTRICT	OF ILLINOIS		
Case numb (if known)	ber			☐ Check if this is an amended filing	
Official	l Form 106H				
	lule H: Your Co	debtors		12/15	
ill it out, ar	nd number the entries in the and case number (if know		the Additional Page t	tion. If more space is needed, copy the Additional Page to this page. On the top of any Additional Pages, write e as a codebtor.	,
■ No	;				
		rou lived in a community prona, Nevada, New Mexico, Pu		ry? (Community property states and territories include nington, and Wisconsin.)	
	Go to line 3. 5. Did your spouse, former sp	pouse, or legal equivalent live	with you at the time?		
in line Form	2 again as a codebtor onl	y if that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Officia 06G). Use Schedule D, Schedule E/F, or Schedule G to f	al
	Column 1: Your codebtor Name, Number, Street, City, State and	d ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	_
	Name			☐ Schedule E/F, line	
7	Number Street			_	
	City	State	ZIP Code		

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E	in this information	ta : .la 4:6											
	in this information to the store that the store tha	Jeffrey D. Fe											
Del	btor 2					_							
		otcy Court for the	NORTHERN DISTRIC	CT OF ILLINOIS									
Cas (If kr	se number						☐ An		d filing ent showing	g postpetition llowing date:			
0	fficial Form	106 <u>l</u>				M	M / DD/ Y	YYY					
	chedule I:										12/15		
sup spo atta	plying correct info use. If you are sep ch a separate she	ormation. If you parated and you	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your ith you, do not inclu	spouse i de inforr	s liv natio	ing with y on about y	ou, incluyour spo	ude inform use. If mo	nation about ore space is	your needed,		
1.	Fill in your empl	ill in your employment			Debtor 1					Debtor 2 or non-filling spouse			
	If you have more than one job,	-		■ Employed			☐ Emplo		3 4				
		ttach a separate page with formation about additional	Employment status	☐ Not employed	☐ Not employed			☐ Not er	mployed				
	employers.		Occupation										
	Include part-time self-employed wo		Employer's name	TouchPoint Sup	oort Ser	vice	es						
	Occupation may or homemaker, if		Employer's address	400 Northridge Sandy Springs,			00						
			How long employed the	here?									
Par	rt 2: Give De	etails About Mon	thly Income										
	mate monthly incuse unless you are		ate you file this form. If y	you have nothing to r	eport for	any I	line, write	\$0 in the	space. Inc	lude your noi	n-filing		
	ou or your non-filing e space, attach a s		ore than one employer, co	ombine the informatio	n for all e	mplo	oyers for th	nat perso	n on the lir	nes below. If	you need		
							For Debt	tor 1	For Deb non-filir	otor 2 or ng spouse			
2.			ry, and commissions (becalculate what the month)		2.	\$	2,2	204.58	\$	N/A			
3.	Estimate and lis	t monthly overti	me pay.		3.	+\$		0.00	+\$	N/A			
4.	Calculate gross	Income. Add lin	e 2 + line 3.		4.	\$	2,20	4.58	\$	N/A			

Official Form 106I Schedule I: Your Income page 1

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Deb	tor 1	Jeffrey D. Feldman	-	C	ase r	number (<i>if k</i>	nown)				
	0	va Para Albarra	ā			Debtor 1	4.50	non-	Debtor filing s	pouse	
	Cop	by line 4 here	4.		\$	2,204	4.58	\$		N/A	_
5.	List	t all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$		2.23	\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b.		\$		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		\$		0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans Insurance	5d.		\$ \$		0.00	\$		N/A N/A	_
	5e. 5f.	Domestic support obligations	5e. 5f.		» \$		0.00	\$ 		N/A N/A	_
	5g.	Union dues	5g.		\$ —		0.00	\$		N/A	_
	5h.	Other deductions. Specify:	5h.		\$			+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	;	\$ 		2.23	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	:	\$	1,942		\$		N/A	=
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a.		\$		0.00	\$		N/A	_
	8b.	Interest and dividends	8b.	•	\$	(0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$		0.00	\$		N/A	
	8d.		8d		\$		0.00	\$		N/A	_
	8e.	Social Security	8e.		\$		0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$		0.00	\$		N/A	_
	8g.	Pension or retirement income	8g.		\$		0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h	.+	\$		0.00	+ \$		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$			0.00	\$		N/	4
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	1	,942.35	+ \$		N/A	= \$	1,942.35
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		,342.33			11//	$\begin{bmatrix} - \end{bmatrix}^{\Psi} =$	1,342.33
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe			•				∍ J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	1,942.35
13.	Do	you expect an increase or decrease within the year after you file this form	?						,	Combi month	ned ly income
		No.									

Official Form 106I Schedule I: Your Income page 2

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Filli	n this information to identify yo	ur case:				
Debte	or 1 Jeffrey D. Fe	Idman		Chec	k if this is:	
Debte	or 2 use, if filing)				An amended filing A supplement show 13 expenses as of t	ring postpetition chapter the following date:
Unite	ed States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLING	OIS	1	MM / DD / YYYY	
	e number Jown)					
	ficial Form 106J	_				
	chedule J: Your I	EXPENSES possible. If two married people are	o filing together, both a	ro ogua	Illy responsible fo	12/15
info		eded, attach another sheet to this t				
Part 1.	1: Describe Your House Is this a joint case?	hold				
	No. Go to line 2. ☐ Yes. Does Debtor 2 live i ☐ No ☐ Yes. Debtor 2 mus	n a separate household? t file Official Form 106J-2, Expenses	for Separate Household	of Debt	or 2.	
2.	Do you have dependents?	□ No				
	Do not list Debtor 1 and Debtor 2.	Fill out this information for each dependent	Dependent's relationsh Debtor 1 or Debtor 2	ip to	Dependent's age	Does dependent live with you?
	Do not state the dependents names.		Daughter		12	☐ No ■ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes
3.	Do your expenses include expenses of people other the yourself and your dependent					☐ Yes
Esti	2: Estimate Your Ongoin mate your expenses as of your expenses as of a date after the blicable date.	ng Monthly Expenses our bankruptcy filing date unless y pankruptcy is filed. If this is a supp	ou are using this form lemental <i>Schedule J</i> , c	as a sup heck the	oplement in a Cha e box at the top of	pter 13 case to report the form and fill in the
the v		non-cash government assistance if d have included it on <i>Schedule I:</i> Y			Your expe	enses
4.	The rental or home owners payments and any rent for the	hip expenses for your residence. In ground or lot.	nclude first mortgage	4. \$		0.00
	If not included in line 4:					
		s, or renter's insurance pair, and upkeep expenses ion or condominium dues	me equity loans	4a. \$ 4b. \$ 4c. \$ 4d. \$ 5. \$		0.00 0.00 0.00 0.00

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Debtor 1	Jeffrey D. Feldman	Case num	ber (if known)	
6. Uti	lities:			
o. Uti 6a.		6a.	\$	225.00
6b.		6b.		100.00
6c.		6c.	·	
			·	165.00
6d.		6d.		0.00
	od and housekeeping supplies	7.	·	500.00
Ch	ildcare and children's education costs	8.	\$	0.00
Clo	othing, laundry, and dry cleaning	9.	\$	0.00
. Pei	rsonal care products and services	10.	\$	0.00
	dical and dental expenses	11.	\$	240.00
	ansportation. Include gas, maintenance, bus or train fare.	12.	\$	320.00
	not include car payments.	13.	·	
	tertainment, clubs, recreation, newspapers, magazines, and books		·	50.00
	aritable contributions and religious donations	14.	\$	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	a. Life insurance	15a.	\$	0.00
	o. Health insurance		·	
		15b.	·	0.00
	c. Vehicle insurance	15c.		110.00
	d. Other insurance. Specify:	15d.	\$	0.00
	xes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify:	16.	\$	0.00
	tallment or lease payments:		–	0.00
	a. Car payments for Vehicle 1	17a.	\$	0.00
	c. Car payments for Vehicle 2	17b.	\$	0.00
	c. Other. Specify: Rent-A-Center	17c.	· -	200.00
	d. Other. Specify:	17d.		0.00
. Yo	ur payments of alimony, maintenance, and support that you did not report	as		
ded	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106	I). 18.		0.00
	ner payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.	_	
	ner real property expenses not included in lines 4 or 5 of this form or on So			
20a	a. Mortgages on other property	20a.	·	0.00
20t	o. Real estate taxes	20b.	\$	0.00
200	c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
200	d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	e. Homeowner's association or condominium dues	20e.		0.00
	ner: Specify: School supplies		+\$	20.00
	·		,	20.00
	Iculate your monthly expenses			4 000 00
	a. Add lines 4 through 21.	_	\$	1,930.00
22t	 Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J- 	2	\$	
220	c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,930.00
Cal	Iculate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,942.35
23 0	b. Copy your monthly expenses from line 22c above.	23b.	-φ	1,930.00
230	c. Subtract your monthly expenses from your monthly income.			
_50	The result is your monthly net income.	23c.	\$	12.35
4 5	to the state of th		. fa	
	you expect an increase or decrease in your expenses within the year after example, do you expect to finish paying for your car loan within the year or do you expect y			se or decrease because o
	diffication to the terms of your mortgage?	- ar mortgage	rajinon to morea:	Jo of Goordage Decause C
	No.			
	Yes. Explain here:			
	100.			

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Fill in this info	rmation to identify your	case:			
Debtor 1	Jeffrey D. Feldma	an			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Ch	eck if this is an
				an	nended filing
You must file thobtaining mone	nis form whenever you fi	ile bankruptcy schedules n connection with a bank		ect information. Making a false statement, conce i fines up to \$250,000, or impriso	
Sig	gn Below				
Did you p	ay or agree to pay some	eone who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
_	Name of person			Attach Bankruptcy Petitio Declaration, and Signatur	
☐ Yes. Under pen		that I have read the sum	mary and schedules filed		
☐ Yes. Under pen	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed	Declaration, and Signatur	
☐ Yes. Under pen that they a	alty of perjury, I declare	that I have read the sum	·	Declaration, and Signatur	
Under pen that they a	nalty of perjury, I declare are true and correct. ffrey D. Feldman	that I have read the sum	x	Declaration, and Signatur	

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Fill i	n this inform	ation to identify you	r case:			
Debt	or 1	Jeffrey D. Feldm	an			
		First Name	Middle Name	Last Name		
Debt (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ban	kruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
_		., .,				
(if know	e number wn)				_	Check if this is an mended filing
Offi	icial For	m 107				
			Affairs for Indivi	duals Filing for B	ankruptcy	4/16
inforr	mation. If mo per (if known	ore space is needed,). Answer every que	attach a separate sheet to	this form. On the top of any	equally responsible for sup additional pages, write you	
		current marital statu				
[☐ Married ■ Not marr	ied				
2. [Ouring the la	st 3 years, have you	lived anywhere other than	where you live now?		
] [■ No □ Yes. List	all of the places you I	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor co, Texas, Washington and V	
i [■ No □ Yes. Mak	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explain	the Sources of You	r Income			
F	Fill in the total	amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including partetogether, list it only once ur		ndar years?
[□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$22,974.49	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Page 44 of 61 Case number (if known) Debtor 1 **Jeffrey D. Feldman**

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco Check all that app		Gross income (before deductions and exclusions)
	r last caler anuary 1 to	ndar year: December	31, 2015)	■ Wages, commissions, bonuses, tips	\$29,503.00	☐ Wages, comm bonuses, tips	iissions,	
				☐ Operating a business		☐ Operating a but	usiness	
		dar year be December		■ Wages, commissions, bonuses, tips	\$15,082.00	☐ Wages, comm bonuses, tips	iissions,	
				☐ Operating a business		☐ Operating a but	usiness	
5.	Include in and other winnings. List each	come regard public bene If you are fil	dless of wheth fit payments; ing a joint cas the gross inco	e during this year or the two ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat	imples of other income are a est; dividends; money collec- you received together, list it o	ted from lawsuits; ronly once under Deb	oyalties; and otor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco	me	Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for	Bankruptcy			
6.	Are eithe ☐ No.	Neither D	ebtor 1 nor D	's debts primarily consumer Debtor 2 has primarily consu personal, family, or househol	imer debts. Consumer debts	s are defined in 11 L	J.S.C. § 101	I(8) as "incurred by an
		During the No.	90 days befo	ore you filed for bankruptcy, di	d you pay any creditor a total	I of \$6,425* or more	?	
		☐ Yes	paid that cr not include	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the	its for domestic support oblig his bankruptcy case.	ations, such as child	d support ar	nd alimony. Also, do
	_			t on 4/01/19 and every 3 years		or after the date of	adjustment.	
	■ Yes.			or both have primarily consure you filed for bankruptcy, di		I of \$600 or more?		
		■ No.	Go to line 7	·.				
		□ Yes	include pay	each creditor to whom you pai rments for domestic support of this bankruptcy case.				
	Creditor	's Name an	d Address	Dates of payme	nt Total amount	Amount you	Was this p	ayment for

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Debtor 1	Jeffrey D. Feldman	Document	Case number (if known)	

7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. ■ No □ Yes. List all payments to an insider.	artners; relatives of any gene control, or owner of 20% or	eral partners; partner more of their voting	erships of wh g securities;	ich you and an	ı are a genera y managing a	al partner; corporations agent, including one for	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount still o		Reason for	this payment	
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		•			count of a d	ebt that benefited an	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount still o		Reason for Include cred	this payment litor's name	
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures	·					
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.							
	Case title Case number					Status of th	ne case	
	NPI Inc. v. Jeff Feldman 95 LM 3333	Forcible Entry & Detainer	Circuit Court of the 18th Jud. Cir.			 □ Pending □ On appeal ■ Concluded Judgment entered 12/31/95 		
						Juagment		
	Janusz K. Bienia v. Jeff Feldman & Rhonda Morros 96 LM 2334	Forcible Entry & Detainer	Cir. Ct. of the 1 Cir.	8th Judicia	al	□ Pending□ On appeal■ Concluded		
						Judgment	entered 8/7/96	
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11.		rty repossessed, fo	oreclosed, ç	garnisl	ned, attached	d, seized, or levied?	
	Yes. Fill in the information below. Creditor Name and Address	Describe the Property			Date		Value of the	
	oroanor namo ana nauroso	Explain what happened	l		Julio		property	
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No Yes. Fill in the details.	otcy, did any creditor, incl		nancial insti	tution,	set off any a	amounts from your	
	Creditor Name and Address	Describe the action the	creditor took		Date a	ction was	Amount	

Document Page 46 of 61 Case number (if known) Debtor 1 Jeffrey D. Feldman 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No Yes. Fill in the details for each gift or contribution. Value Gifts or contributions to charities that total Describe what you contributed Dates you more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. П Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred or transfer was Address payment Email or website address made Person Who Made the Payment, if Not You **CIN Legal Data Services** 7/6/16 \$33.00 **Box 88588** Milwaukee, WI 53288-0588 4/21/16 \$432.00 Gloria M. Longest 385 South Broadway Coal City, IL 60416 **Abacus Credit Counseling** 9/24/16 \$25.00 15760 Ventura Blvd. Ste. 700

Encino, CA 91436

Case 16-37090

Doc 1

Filed 11/22/16

Entered 11/22/16 09:34:42

Desc Main

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Debtor 1 Jeffrey D. Feldman

17.	Within 1 year before you filed for bankruptc promised to help you deal with your credito Do not include any payment or transfer that you No	rs or to make payments			r transfer any propei	rty to anyone who		
	Yes. Fill in the details.							
	Person Who Was Paid Address	Description and vertransferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No Yes. Fill in the details.	usiness or financial affa ade as security (such as the	irs? he granting of a se					
	Person Who Received Transfer	Description and v	alue of	Doscribo a	iny property or	Date transfer was		
	Address Person's relationship to you	property transferr			received or debts	made		
	r erson's relationship to you							
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		y property to a se	elf-settled tru	st or similar device o	of which you are a		
	Name of trust Description and value of the property transferred Date Transfer was made							
						made		
Par	List of Certain Financial Accounts, Ins	struments, Safe Deposit	Boxes, and Stora	age Units				
20.	Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associated No	or other financial accour	nts; certificates of					
	Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clos	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 y cash, or other valuables?	year before you filed for	bankruptcy, any	safe deposit	box or other deposi	itory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the c	contents	Do you still have it?		
22.	Have you stored property in a storage unit o No Yes. Fill in the details.	or place other than your	home within 1 ye	ear before yo	u filed for bankruptc	cy?		
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		escribe the c	contents	Do you still have it?		

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Case number (if known) Document

Debtor 1 Jeffrey D. Feldman

Par	t 9: Identify Property You Hold or Control for	Someone Else							
23.	Do you hold or control any property that someofor someone.	one else owns? Include any proper	rty you borrowed from, are storing fo	r, or hold in trust					
	No								
	Yes. Fill in the details.	NA(1)	5 " "	., .					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Par	t 10: Give Details About Environmental Information	ation							
For	the purpose of Part 10, the following definitions	apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, ground							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, operate,	or utilize it or used					
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic	substance,					
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they occurred.						
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	ental law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any release of hazardous material?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	ironmental law? Include settlements	and orders.					
	■ No								
	Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	t 11: Give Details About Your Business or Con	nections to Any Business							
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	y business?					
	☐ A sole proprietor or self-employed in a f	trade, profession, or other activity,	either full-time or part-time						
	☐ A member of a limited liability company		•						
	☐ A partner in a partnership	, , , , , , , , , , , , , , , , , , , ,	,						
	☐ An officer, director, or managing execut	tive of a corporation							
	☐ An owner of at least 5% of the voting or	-							

Case 16-37090 Doc 1 Filed 11/22/16 Entered 11/22/16 09:34:42 Document Page 49 of 61 Case number (if known) Debtor 1 Jeffrey D. Feldman No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jeffrey D. Feldman Signature of Debtor 2 Jeffrey D. Feldman Signature of Debtor 1 Date Date November 22, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes

■ No

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Fill in this inform	ration to identify your					
	nation to identify your					
Debtor 1	Jeffrey D. Feldma	Middle Name		Last Name		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name		Last Name		
United States Ban	kruptcy Court for the:	NORTHERN DIST	TRICT OF ILL	INOIS		
Case number						— OL 1771111
(if known)						Check if this is an amended filing
						J. T. T. T. J
Official For	m 108					
		n for Indiv	واميراه	Eiling Under C	hantar '	7
Statemen	it of intentio	n for marv	riuuais	Filing Under C	парцег	12/15
If you are an indiv	vidual filing under chap	oter 7, you must fil	l out this for	m if:		
creditors have	claims secured by yo	ur property, or				
	ed personal property a			. hankuuntau natitian au hu t	ha data aat fas	the meeting of evaluate
whichev	er is earlier, unless th			bankruptcy petition or by t use. You must also send co		
on the fo	orm					
	ople are filing together d date the form.	in a joint case, bo	th are equall	y responsible for supplying	correct inform	nation. Both debtors must
J		la 16 maya anasa is		ach a concrete cheet to this	form On the	ton of any additional name
	our name and case num		s needed, atta	ach a separate sheet to this	torm. On the	top of any additional pages,
Part 1: List Yo	ur Creditors Who Have	Secured Claims				
 For any credito information bel 		irt 1 of Schedule D	: Creditors V	Who Have Claims Secured b	y Property (Of	ficial Form 106D), fill in the
Identify the cree	ditor and the property tl	nat is collateral	What do y	ou intend to do with the pro debt?	perty that	Did you claim the property as exempt on Schedule C?
	outhern Automotive	FL		ler the property.		□ No
name:			_	the property and redeem it.		■ Yes
Description of	2008 Nissan Altima	a 100,000		he property and enter into a mation Agreement.		— 163
property	miles		☐ Retain t	he property and [explain]:		
securing debt:						
	ur Unexpired Persona					
For any unexpired in the information	d personal property lea n below. Do not list rea	ase that you listed I estate leases. Un	in Schedule expired lease	G: Executory Contracts and es are leases that are still in	d Unexpired Le	eases (Official Form 106G), fill ase period has not yet ended.
				oes not assume it. 11 U.S.C		
Describe your ur	nexpired personal prop	perty leases			Wi	II the lease be assumed?
-		•			_	
Lessor's name: Description of leas	sed					No
Property:						Yes
Lessor's name:					_	No
Description of leas	sed				Ц	No
Property:						Yes
Lessor's name:						No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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De	btor 1 J e	effrey D. Feldman	Cas	se number (if known)
	scription of operty:	fleased		☐ Yes
De	ssor's namescription of operty:			□ No □ Yes
De	ssor's namescription of operty:			□ No □ Yes
De	ssor's name scription of operty:	. .		□ No □ Yes
De Pro	ssor's namescription of operty:	fleased		□ No □ Yes
Unc	der penalty perty that	n Below y of perjury, I declare that I have i is subject to an unexpired lease. rey D. Feldman		my estate that secures a debt and any personal
^	Jeffrey	D. Feldman e of Debtor 1	Signature of Debt	for 2
	Date	November 22, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
·	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Resources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-37090 Doc 1 Filed 11/22/16 Entered 11/22/16 09:34:42 Desc Main Document Page 56 of 61

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Jeffrey D. Feldman		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DEI	BTOR(S)
С	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(becompensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	y, or agreed to be paid to	me, for services rendered or to
	For legal services, I have agreed to accept		\$	0.00
	Prior to the filing of this statement I have received			0.00
	Balance Due			0.00
2. \$	S 0.00 of the filing fee has been paid.			
3. Т	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. Т	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. I	■ I have not agreed to share the above-disclosed compe	nsation with any other person	n unless they are membe	ers and associates of my law firm.
I	☐ I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the nam			
5. I	In return for the above-disclosed fee, I have agreed to ren	der legal service for all aspe	cts of the bankruptcy cas	se, including:
b c	 Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, states Representation of the debtor at the meeting of creditor [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou 	ment of affairs and plan which is and confirmation hearing, and duce to market value; ex its as needed; preparation	ch may be required; and any adjourned hearing emption planning; p	ngs thereof;
7. E	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.	does not include the following chargeability actions, jud	ng service: dicial lien avoidances	s, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement fo	or payment to me for rep	resentation of the debtor(s) in
N	ovember 22, 2016	/s/ Gloria M. Lor	ngest	
	ate	Gloria M. Longe	st 06194360	
		Signature of Attorn Law Office of G	ney Ioria M. Longest PC	
		385 South Broad	dway	
		Coal City, IL 604	l16 ax: 815-634-2641	
		glongest@cbca		
		Name of law firm		

United States Bankruptcy CourtNorthern District of Illinois

		1101 1111111 2 1011101 01 11111010		
In re	Jeffrey D. Feldman		Case No.	
		Debtor(s)	Chapter 7	
	VF	CRIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	40
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credi	tors is true and correct to	the best of my
Date:	November 22, 2016	/s/ Jeffrey D. Feldman Jeffrey D. Feldman		

Adventist Bolingbrook Hospital 75 Remittance Dr., Ste.6097 Chicago, IL 60675-6097

Adventist Hinsdale Hospital 120 N. Oak St. Hinsdale, IL 60521

AT&T Bankruptcy Department PO Box 769 Arlington, TX 76004

Athletic & Therapeutic Inst. PO Box 371863 Pittsburgh, PA 15250-7863

Cathy Sultiff 188 W.Raneolph #1920 Chicago, IL 60601

City of Joliet/City Collector 150 W. Jefferson St Joliet, IL 60432-4156

College of DuPage 425 Fawell Blvd. Glen Ellyn, IL 60137

Comcast Cable PO Box 3001 Southeastern, PA 19398-3001

Convergent Outsourcing Inc PO Box 9004 Renton, WA 98057-9004

Credence Resource Management PO Box 2300 Southgate, MI 48195

Depondon Collection Service PO Box 4833 Oak Brook, IL 60522-4833 Dish Network
Dept 94063
Palatine, IL 60094-4063

DuPage Pathology Assoc. SC 520 E. 22nd Street Lombard, IL 60148

Enterprise Recovery Systems, Inc. PO Box 5119
Oak Brook, IL 60522-0516

First National Collection Bureau 610 Waltham Way Sparks, NV 89434

First Premier 601 S Minneapolis Ave Sioux Falls, SD 57104

First Premier Bank 601 S. Minneapolis Avenue Sioux Falls, SD 57104

Franklin Collection Service Inc PO Box 3910 Tupelo, MS 38803-3910

Gatestone & Co. International Inc. 1000N. West Street, Ste. 1200 Wilmington, DE 19801

IC System Inc. PO Box 64378 Saint Paul, MN 55164

Illinois American Water 95 Meadows Drive Gilberts, IL 60136

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664 Illinois Emergency Medicine PO Box 71402 Chicago, IL 60694-1400

Illinois Tollway PO Box 5544 Chicago, IL 60680-5544

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Janusz K Bienia 2901 Butterfield Rd. Oak Brook, IL 60521

Malcom S. Gerald & Assoc 332 S. Michigan Ave., Ste. 600 Chicago, IL 60604

Merchants Credit Guide Co. 223 W. Jackson Blvd. Chicago, IL 60606

Midland Credit management Inc. 2365 Northside Dr., Ste. 300 San Diego, CA 92108

Midland Credit Management Inc. PO Box 60578 Los Angeles, CA 90056-0578

Nationwide Credit Inc. PO Box 26314 Lehigh Valley, PA 18002-6314

PAM, LLC-IL Tollway-Unpaid Tolls PO Box 752 Milwaukee, WI 53201-0752

Penn Credit Corp.
PO Box 988
Harrisburg, PA 17108-0988

PLS Financial Sollutions of IL Inc 348 Commons Dr. Bolingbrook, IL 60440

Southern Automotive FL 2901 Wm Oakland Park Blvd Fort Lauderdale, FL 33311

Southwest Credit Systems 4120 International Parkway Suite 1100 Carrollton, TX 75007

State Collection Service Po Box 6250 Madison, WI 53716

Suburban Radiologists SC 1446 N. Momentum Place Chicago, IL 60689-5314

T-Mobile P.O. Box 742596 Cincinnati, OH 45274-2596

West Asset Management Inc. PO Box 790113 Saint Louis, MO 63179-0113